

NOTICE OF APPEARANCE FOR SUBSTITUTE, ADDITIONAL, OR AMICUS COUNSEL

Short Title: Cayuga Medical Center v. National Labor Relations Board Docket No.: 18-3585

Substitute, Additional, or Amicus Counsel's Contact Information is as follows:

Name: Erin S. Torcello, Esq.

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Appearance for: Cayuga Medical Center at Ithaca, Inc./Petitioner
(party/designation)

Select One:

☐ Substitute counsel (replacing lead counsel: _____)
(name/firm)

☐ Substitute counsel (replacing other counsel: _____)
(name/firm)

☒ Additional counsel (co-counsel with: Raymond J. Pascucci/Bond, Schoeneck & King, PLLC)
(name/firm)

☐ Amicus (in support of: _____)
(party/designation)

CERTIFICATION

I certify that:

☒ I am admitted to practice in this Court and, if required by Interim Local Rule 46.1(a)(2), have renewed
my admission on _____ OR

☐ I applied for admission on _____.

Signature of Counsel: /s/Erin S. Torcello, Esq.

Type or Print Name: Erin S. Torcello, Esq.